

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	2285	5-30-00
O.I.P.E. CLASSIFIER		5	6-13-00
FORMALITY REVIEW	IV. FLSHA	JCBSS	08-12-00
RESPONSE FORMALITY REVIEW	MD	JCS	04/10/01

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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